

111TH CONGRESS
2^D SESSION

H. CON. RES. 333

Supporting the goals and ideals of World AIDS Day.

IN THE HOUSE OF REPRESENTATIVES

DECEMBER 1, 2010

Ms. LEE of California (for herself, Ms. EDWARDS of Maryland, Mr. RUSH, Mr. GRIJALVA, Ms. BORDALLO, Mr. FRANK of Massachusetts, Mr. HINCHHEY, Ms. NORTON, Ms. SPEIER, Mr. DEUTCH, Mr. STARK, Ms. WOOLSEY, Mr. RANGEL, Mr. JOHNSON of Georgia, Ms. BALDWIN, Mr. POLIS of Colorado, Ms. MCCOLLUM, Ms. DELAURO, Mr. COHEN, Ms. ROYBAL-ALLARD, Mr. SERRANO, Mr. CONYERS, Mr. MEEKS of New York, Mrs. CHRISTENSEN, Mr. PAYNE, and Mr. ELLISON) submitted the following concurrent resolution; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Foreign Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

CONCURRENT RESOLUTION

Supporting the goals and ideals of World AIDS Day.

Whereas the Joint United Nations Programme on HIV/AIDS (UNAIDS) estimates that since the identification of AIDS in 1981, more than 60,000,000 people have been infected with HIV, and nearly 30,000,000 people have died of AIDS worldwide;

Whereas in 2009, UNAIDS estimated that 33,300,000 people were living with HIV around the world, 1,800,000 people

died of AIDS-related illnesses, and another 2,600,000 people were newly infected;

Whereas 260,000 children under the age of 15 died from AIDS in 2009, while 2,500,000 children were living with HIV, 90 percent of whom reside in Sub-Saharan Africa;

Whereas each day over 1,000 children under the age of 15 become newly infected with HIV, and worldwide 53 percent of pregnant women in low and middle income countries receive services to prevent HIV transmission to their newborns;

Whereas the proportion of women living with HIV has remained stable at slightly less than 52 percent of the global total;

Whereas developing countries continue to bear the brunt of the AIDS pandemic with Sub-Saharan Africa accounting for 68 percent of all adults and children living with HIV, 60 percent of whom are women and girls;

Whereas people living with HIV/AIDS are frequently susceptible to other opportunistic infections, and according to the World Health Organization, in 2008 approximately 1,400,000 people living with HIV were also estimated to be co-infected with tuberculosis;

Whereas the Centers for Disease Control and Prevention (CDC) estimates that in the United States, more than 1,100,000 people are living with HIV, and 21 percent do not know they are infected;

Whereas a total of 597,499 people have died of AIDS in the United States from the beginning of the HIV/AIDS epidemic through 2007;

Whereas each year 56,300 people become newly infected with HIV in the United States, and on average, an individual is infected with HIV every 9½ minutes;

Whereas at the end of 2007, African-Americans represented 48 percent of all people living with HIV in the United States, Whites represented 33 percent, Hispanics represented 17 percent, Asian-Americans and Pacific Islanders represented 1 percent, and American Indians and Alaska Natives represented less than 1 percent;

Whereas men who have sex with men (MSM), particularly young MSM of color, have represented an increasing share of new HIV infections over the past decade and in 2008 MSM accounted for 54 percent of all new infections;

Whereas men account for 73 percent of all people living with HIV in the United States, and women represent 27 percent;

Whereas in the United States, African-American women are 18 times more likely to become newly infected with HIV than White women, and Hispanic women are 5 times more likely to have AIDS than non-Hispanic White women;

Whereas 5,259 young people aged 13 to 24 were newly diagnosed with HIV/AIDS in 2006, representing about 14 percent of all new diagnoses in the United States during that year;

Whereas in the United States as of November 2010, approximately 4,157 people across 9 States have been placed on waiting lists to receive AIDS treatment through the AIDS Drug Assistance Program authorized through the Ryan White CARE Act;

Whereas in order to address the HIV/AIDS epidemic in the United States, the Ryan White HIV/AIDS Treatment Extension Act of 2009 was enacted into law on October 30, 2009, reauthorizing Federal HIV/AIDS care and treatment programs for 4 years and making funding available to United States metropolitan areas, States, and service providers to assist affected families and persons living with HIV/AIDS with healthcare and support services;

Whereas to further focus attention on the HIV/AIDS epidemic among minority communities in the United States, in 1998, Congress and the Clinton Administration created the Minority AIDS Initiative to provide funds to State and local institutions and organizations to best serve the healthcare costs and support the needs of racial and ethnic minorities living with HIV/AIDS;

Whereas Congress provided \$1,400,000 for the Office of National AIDS Policy (ONAP) within the White House in the FY2009 Omnibus Appropriations Act and the FY2010 Omnibus Appropriations Act in order to develop a National AIDS Strategy to better coordinate and guide the Nation's response to HIV/AIDS;

Whereas ONAP conducted a series of town halls across the country to solicit feedback directly from communities impacted by HIV/AIDS in order to provide a basis for developing a National AIDS Strategy;

Whereas, on July 13, 2010, ONAP released the "National AIDS Strategy for the United States" along with an accompanying "Federal Implementation Plan" to achieve the goals of reducing new HIV infections, increasing access to care and improving health outcomes for people living with HIV, reducing HIV-related disparities and

health inequities, and achieving a more coordinated national response to the HIV epidemic;

Whereas, on April 7, 2009, the CDC launched a new communication campaign, “Act Against AIDS”, to facilitate awareness, public education, health literacy, health care provider marketing, and highly targeted behavior change communication objectives in the fight against HIV/AIDS;

Whereas to address the global HIV/AIDS epidemic, in 2000, Congress passed the Global AIDS and Tuberculosis Relief Act, providing the first contribution and the founding framework for what became the Global Fund to Fight AIDS, Tuberculosis, and Malaria, which provides grants to developing countries to combat the 3 diseases;

Whereas since the Global Fund was created in 2002, donors have pledged more than \$30,000,000,000 in funding, including \$9,547,000,000 by the United States, of which more than \$5,130,000,000 has already been donated;

Whereas as of December 2010, the Global Fund has supported treatment to over 3,000,000 people for HIV/AIDS, directly observed treatment to 7,700,000 people for tuberculosis, and over 160,000,000 insecticide treated-bednets to fight malaria, saving an estimated 6,500,000 lives;

Whereas in order to further address the global HIV/AIDS epidemic, in 2008, Congress reauthorized the President’s Emergency Plan for AIDS Relief (PEPFAR) through the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act, authorizing \$48,000,000,000 over 5 years to combat the 3 diseases;

Whereas, between fiscal years 2009 and 2013, PEPFAR programs aim to support care for 12,000,000 HIV-affected people, including children orphaned by AIDS, support the prevention of 12,000,000 new HIV infections; and help at least 4,000,000 people receive antiretroviral treatment;

Whereas, as of September 30, 2010, PEPFAR had supported the treatment of 3,200,000 people and in FY2010 alone supported the prevention of mother-to-child HIV transmission for more than 600,000 HIV-positive pregnant women, allowing more than 114,000 infants to be born HIV-free, while directly supporting care for 11,000,000 people, including 3,800,000 orphans and vulnerable children;

Whereas, between 2004 and 2010, Congress provided approximately \$31,385,000,000 to combat global HIV/AIDS through PEPFAR and the Global Fund;

Whereas as a result of these and other efforts, the rate of new HIV infections has declined by 19 percent since 1999 and the number of AIDS-related deaths has declined by 19 percent between 2004 and 2009, due in part to the expansion of HIV/AIDS prevention and treatment programs;

Whereas since the availability of effective HIV/AIDS treatments and the increasing availability of treatments to prevent mother to child transmission of HIV, approximately 5,200,000 people are currently receiving antiretroviral therapy, an increase of 30 percent since 2008, and the number of children infected with HIV through mother to child transmission has been reduced by 24 percent since 2004;

Whereas in 2001, representatives and heads of state of 189 countries, including the United States, convened at the first-ever Special Session of the United Nations General Assembly on HIV/AIDS and unanimously adopted the Declaration of Commitment on HIV/AIDS;

Whereas the United Nations Declaration of Commitment outlines prevention, treatment, and funding methods for achieving the Millennium Development Goal of halting and beginning to reverse the spread of HIV/AIDS by 2015;

Whereas in 2006, the United Nations General Assembly convened a High Level Meeting on AIDS, pledging to move toward the goal of universal access to comprehensive prevention programs, treatment, care, and support by 2010;

Whereas in 2008, the United Nations General Assembly convened a second High Level Meeting on AIDS to review progress towards achieving the goal of universal access and the Declaration of Commitment on HIV/AIDS;

Whereas the concept of World AIDS Day originated at the 1988 World Summit of Ministers of Health on Programmes for AIDS Prevention and was established to focus attention on the HIV/AIDS pandemic;

Whereas December 1 is now recognized as World AIDS Day and has been taken up by governments, international organizations, and charities around the world; and

Whereas the theme of World AIDS Day 2010 is “Universal Access and Human Rights” and is intended to focus attention on the goal of providing universal access to HIV/AIDS prevention, treatment, care, and support programs and the fundamental need to support and protect human rights for all people, particularly vulnerable and

marginalized populations, in order to achieve this goal:
Now, therefore, be it

1 *Resolved by the House of Representatives (the Senate*
2 *concurring), That Congress—*

3 (1) supports the goals and ideals of World
4 AIDS Day and recognizes the 22nd anniversary of
5 observing this day;

6 (2) commends the President, State, and local
7 governments, including their public health agencies,
8 for recognizing this day, for publicizing its impor-
9 tance among their communities, and for encouraging
10 individuals to undergo testing for HIV;

11 (3) commends national, State, and local media
12 organizations for carrying messages in support of
13 World AIDS Day;

14 (4) commends the work of AIDS service organi-
15 zations and community and faith based organiza-
16 tions that are providing effective, evidence based,
17 prevention, treatment, care, and support services to
18 people living with and vulnerable to HIV/AIDS;

19 (5) supports continued funding for prevention,
20 care, treatment services, and research programs for
21 persons living with HIV/AIDS in the United States
22 including, through the Ryan White HIV/AIDS
23 Treatment Extension Act, the Minority HIV/AIDS
24 Initiative, the Centers for Disease Control and Pre-

vention, the National Institutes of Health, the Substance Abuse and Mental Health Services Administration, the Office of Minority Health, and the Office of the Secretary of Health and Human Services;

(6) supports the implementation of the National AIDS Strategy and its goals to reduce new HIV infections, increase access to care and improve health outcomes for people living with HIV, reduce HIV-related disparities and health inequities, and achieve a more coordinated national response to the HIV epidemic;

(7) supports continued funding for the President's Emergency Plan For AIDS Relief and the Global Fund to Fight AIDS, Tuberculosis, and Malaria to provide prevention, care, and treatment to combat HIV/AIDS in developing countries;

(8) supports the goal of providing universal access to comprehensive HIV/AIDS prevention, treatment, care, and support programs;

(9) supports the goal of protecting human rights for all people, including vulnerable and marginalized populations such as men who have sex with men, injecting drug users, and sex workers; and

(10) supports efforts to address the factors that make populations vulnerable to HIV/AIDS by de-

- 1 creasing poverty and hunger, expanding educational
- 2 opportunities for children, and empowering women.

